

Chronic obstructive lung disease kills thousands of smokers each

year. It is conservatively estimated that there were more than

34,000 smoking related deaths from chronic obstructive lung disease

in 1979.<sup>96</sup> Numerous prospective and retrospective epidemiological studies have established that smokers are more likely than nonsmokers to develop chronic obstructive lung disease.<sup>97</sup> Six prospective

studies representing a total of over 13 million patient years of observation and almost 270,000 deaths from all causes found that

smokers were from 2.3 to 24.7 times more likely to die of chronic obstructive lung disease than were nonsmokers.<sup>98</sup> While the

mortality ratios in these studies vary considerably, they all lead to

95 (Footnote Continued)

alveoli, the tiny airsacks in the lungs from which oxygen is transferred to the blood and carbon dioxide is removed from the blood. The breakdown in the alveolar walls reduces the surface area of the lungs that is exposed to the bloodstream and diminishes the lungs' ability to deliver oxygen and remove waste gases. A conclusive diagnosis of emphysema can only be made after death through autopsy.

Chronic bronchitis can be diagnosed prior to death and is characterized by two main dysfunctions: (1) fixed narrowing of the airways and (2) mucous formation in the airways. If someone suffers from narrowing of the airways and extra production of mucous, both of which may be found by specialized tests of pulmonary function, for more than three months a year, two years in a row, that person is characterized as having chronic bronchitis.

96 See 1980 Surgeon General's Report on Smoking and Women at 160 in which it is reported that a total of 46,000 people died of COLD in 1977; n. 100, *infra*, where it is estimated that 70-80% of those deaths are smoking related.

97 1979 Surgeon General's Report, Ch. 6 at 9.

98 *Id.*, Ch. 6 at 10.

1005052254

ГОТАМБДИН: КУЮ РОТ

Source: <https://www.industrydocuments.ucsf.edu/docs/fthl0000>